David Deichert, ND Co-Chair Health Information Infrastructure Stakeholder Advisory Committee (HIISAC) Bastyr Center for Naturopathic Health Address: 3670 N Stoneway Seattle, WA 98103

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HIIAB Members, HCA Staff and Interested Parties:

The previous two HIIAB meetings have been extremely productive with significant strides taken towards the resolution of difficult topics such as governance and infrastructure. I applaud these recent achievements; it is exciting to witness profound progress in a worthy endeavor.

However, I do have concerns surrounding the details of the governance proposal, and in particular, the breakdown of the 17 available positions on the proposed 501(c)(3) or 501(c)(4) board (the Board). Currently, there is a Board position entitled "Physician" another entitled "Other Provider" and three entitled "At Large Stakeholders" but no specific position has been designated to Naturopathic Physicians. Perhaps it is the HIIAB's intention that Naturopaths will fall under the category of "Other provider" or will be awarded one of the "At large stakeholders" positions. I believe this to be inadequate for several reasons:

First, the terminology of "Other Provider" is sufficiently vague as to allow a myriad of professions within the health care system to occupy this Board position. By adopting this terminology, the HIIAB allows the opportunity for the elimination of Naturopaths or other Complimentary and Alternative Medicine (CAM) practitioners from proper representation and participation on the Board.

Second, the 503-C board positions of "At large Stakeholders" are to be filled at the Board's discretion. While this may allow needed flexibility to the Board, it also ensures these positions to be the subject and reflection of the political environment of the Board. Due to the political nature of the "At Large Stakeholders" board positions, they do not offer a permanent position on the Board for Naturopaths or other CAM practitioners and offers the threat of eliminating proper representation and participation by these professions.

Given the ambiguity of the previously mentioned terminology and the potential consequences they possess, I propose the modification of these terminologies to include Naturopathic Physician. I believe this to be vital to the success of the Washington State Health Information Infrastructure (WSHII) for several reasons summarized below:

First, Naturopaths have the broadest scope of practice of any CAM provider group and are recognized by patients, the Washington State Department of Health, and many third party payers as primary care providers. As such, we are daily participants in numerous components of the health care system relevant to the creation of the WSHII. For example, Naturopaths utilize laboratory tests, imaging, and prescription medications in their daily practice of medicine. Given the scope, breadth and uniqueness (as compared to other CAM practitioners) of the interface between Naturopathic Physicians and the medical community, and that the goal of the WSHII is to provide physicians with complete patient medical history, it is paramount that Naturopaths be integrated and active participants in the development of such a network.

Second, in the Round Table Focus Group between Bellingham consumers, Juan Alaniz, and Wendy Carr, patients were very clear in their request to ensure that a broad scope of practitioners have the capacity to fully operate within a state-wide HealthIT network. The HIIAB has placed significant value on the opinion and thoughts of consumers throughout this process, and in order to meet these requests, Naturopaths should have a designated role on the Board.

I believe that the steps taken to include Naturopaths on the Board is best left to the discretion of the HIIAB. One potential option is to simply change the Board position for "Other Provider" to "Naturopathic Physician". Another option is to reduce the number of "At Large Stakeholders" Board positions by one and add "Naturopathic Physician". Both of these options keep the total number of Board representatives at 17 thus meeting the requirement of an odd number of Board members to avoid tie votes.

I thank you for your time and consideration and look forward to continued progress from the HIIAB, and a response to this recommendation.

Sincerely,

David Deichert, ND Co-Chair, HIISAC